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Bib Data Sheet

CONFIRMATION NO. 8440

SERIAL NUMBER 09/752,359	FILING DATE 12/30/2000 RULE	CLASS 257	GROUP ART UNIT 2814	ATTORNEY DOCKET NO. 042390P9473
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APPLICANTS

Gary Cao, Santa Clara, CA;
 Alan Wong, San Jose, CA;

** CONTINUING DATA ***** *RCE sn*

** FOREIGN APPLICATIONS ***** *None sn*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/20/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>(02/28/06)</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
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ADDRESS

Michael A. Bernadicou
 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
 Seventh Floor
 12400 Wilshire Boulevard
 Los Angeles, CA
 90025-1026

TITLE

Enhanced uniqueness for pattern recognition

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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